



TEXAS DEPARTMENT OF FAMILY AND PROTECTIVE SERVICES

COMMISSIONER
Carey D. Cockerell

Date

Re: Internal Control Certification (ICC)

Dear DFPS Contractor:

The Texas Department of Family and Protective Services (DFPS) uses a risk-based contract monitoring system. The Internal Control Structure Questionnaires (ICSQs) are part of the monitoring program, representing basic fiscal monitoring tools. Identified contractors are required to submit an ICSQ and certify controls thereafter with an ICC.

ATTACHED IS A COPY OF A PREVIOUSLY SUBMITTED ICSQ FOR YOUR DFPS CONTRACT(S). WE ASK THAT YOU REVIEW CAREFULLY AND COMPLETE THE ATTACHED INTERNAL CONTROL CERTIFICATION (ICC). NOTE THAT IF THERE HAVE BEEN SIGNIFICANT CHANGES, A NEW ICSQ MAY BE REQUIRED.

Changes must be indicated if there have been any changes in the following: Chart of Accounts, List of State Contracts, Inventory Listing, Insurance Coverage, Names and Titles of Staff, Policies and Procedures, etc.

Mail the enclosed ICC to me at the following address by Date.

Name & Mail Code
Title
Mailing Address
City, State Zip Code

If you have any questions regarding the proper completion of the enclosed Certification, please feel free to contact me at Telephone Number.

Sincerely,

Name
Title

Enclosure: Internal Control Certification
Internal Control Structure Questionnaire

Internal Control Certification (ICC)

Contractor: Collin County

DFPS Contract Number(s): 23379896

Please note that an ICC can only be used to certify an ICSQ that is not older than four fiscal years (current and 1st three prior fiscal years).

1. Please initial and date next to the appropriate box after reviewing the applicable section of the ICSQ being certified:



FINANCIAL POSITION - Review for changes to accounting procedures and financial stability.



GENERAL/ACCOUNTING CONTROLS - Review for changes to allocations plans, if applicable; Chart of Accounts, information on contracts/programs administered; any changes to accounting system, etc.



PERSONNEL - Review for changes to personnel and payroll practices.



TRAVEL - Review for changes to travel policy.



EQUIPMENT - Review for changes to capitalization threshold and inventory.



SUBCONTRACTORS - Review for changes in procurement and/or monitoring procedures.



RELATED PARTY TRANSACTIONS - Review for changes of related parties in organization and updated lease information.

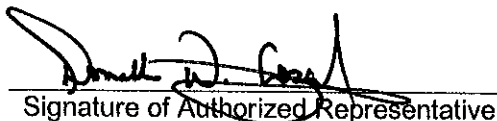


ALLOCATION - This Section is specific to State Agencies and Universities only. Review for updated allocation plans and person who certifies the plan, and updated Certification of Match funds procedure.

2. I have reviewed the Internal Control Structure Questionnaire and supporting documentation originally certified by our organization on _____, and re-certify one of the following:

☒ The ICSQ and supporting documentation remains true and accurate, with no exceptions.

☐ The ICSQ and supporting documentation remains true and accurate, with the exception of changes indicated on the attached documents. (Please indicate the applicable contract number, corresponding ICSQ number and how changed.)


Signature of Authorized Representative

Donald W. Cozad
Printed/Typed Name

7/9/09
Date

Collin County Auditor
Title